

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 1  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Black Conservatives Fund</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00560599		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">▶</span> <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: flex-end; gap: 10px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <b>Eusatrix Corp</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: flex-end; gap: 10px;"><div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div><div>11 / 26 / 2014</div></div>		
Mailing Address P.O. Box 2543			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2000.00</div>		
City Palm Springs		State CA	Zip Code 92263		Transaction ID : SE.22509
Purpose of Expenditure GOTV Activities		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>		Date of Disbursement or Obligation <div style="display: flex; justify-content: flex-end; gap: 10px;"><div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div><div>11 / 26 / 2014</div></div>	
Name of Federal Candidate WILLIAM CASSIDY			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">37395.20</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff
Full Name of Payee			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: flex-end; gap: 10px;"><div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div>		
Mailing Address			Amount <div style="border: 1px solid black; padding: 2px;"></div>		
City		State	Zip Code		Date of Disbursement or Obligation <div style="display: flex; justify-content: flex-end; gap: 10px;"><div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div>
Purpose of Expenditure		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>			
Name of Federal Candidate			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px;"></div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">2000.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">2000.00</div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Patrick Krason</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <div style="display: flex; justify-content: flex-end; gap: 10px;"><div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div><div>11 / 26 / 2014</div></div>		